

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
JOLLY	JERRY	R.	(916) 419-2513
MAILING ADDRESS (May be business address)	STREET	CITY	STATE ZIP CODE
3927 Lennane Drive, Suite 100	Sacramento	CA 95834	Jerry.Jolly@abc.ca.gov
			OPTIONAL: FAX / E-MAIL ADDRESS

1. Office, Agency or Court

Name of Office, Agency or Court:

Department of Alcoholic Beverage Control

Division, Board, District, if applicable:

Headquarters

Your Position:

Director

→ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

- ☒ State
- ☐ County of _____
- ☐ City of _____
- ☐ Multi-County _____
- ☐ Other _____

3. Type of Statement (Check at least one box)

☒ Assuming Office/Initial Date: 02 / 11 / 04

☐ Annual: The period covered is January 1, 2003, through December 31, 2003.

-or-

☐ The period covered is ____/____/____, through December 31, 2003.

☐ Leaving Office Date Left: ____/____/____
(Check one)

☐ The period covered is January 1, 2003, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate

4. Schedule Summary

(Check applicable schedules or "No reportable interests.")

→ During the reporting period, did you have any reportable interests to disclose on:

Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes – schedule attached
Investments (10% or greater Ownership)

Schedule B ☐ Yes – schedule attached
Real Property

Schedule C ☐ Yes – schedule attached
Income & Business Positions (Income Other than Loans, Gifts, and Travel)

Schedule D ☐ Yes – schedule attached
Income – Loans

Schedule E ☐ Yes – schedule attached
Income – Gifts

Schedule F ☐ Yes – schedule attached
Income – Travel Payments

-or-

→ ☒ No reportable interests on any schedule

Total number of pages
completed including this cover page: 1

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 8, 2004
(month, day, year)

Signature _____
(with your filing official.)